

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-672)

SERIAL NO. **09/926742**

FILED DATE

APPLICANT(S)

CLAIMS						
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DER.	IND.	DER.	IND.	DER.
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TOTAL 51	2	1	1	1	1	1
TOTAL 52	2	1	1	1	1	1
TOTAL 53	2	1	1	1	1	1
TOTAL 54	2	1	1	1	1	1
TOTAL 55	2	1	1	1	1	1
TOTAL 56	2	1	1	1	1	1
TOTAL 57	2	1	1	1	1	1
TOTAL 58	2	1	1	1	1	1
TOTAL 59	2	1	1	1	1	1
TOTAL 60	2	1	1	1	1	1
TOTAL 61	2	1	1	1	1	1
TOTAL 62	2	1	1	1	1	1
TOTAL 63	2	1	1	1	1	1
TOTAL 64	2	1	1	1	1	1
TOTAL 65	2	1	1	1	1	1
TOTAL 66	2	1	1	1	1	1
TOTAL 67	2	1	1	1	1	1
TOTAL 68	2	1	1	1	1	1
TOTAL 69	2	1	1	1	1	1
TOTAL 70	2	1	1	1	1	1
TOTAL 71	2	1	1	1	1	1
TOTAL 72	2	1	1	1	1	1
TOTAL 73	2	1	1	1	1	1
TOTAL 74	2	1	1	1	1	1
TOTAL 75	2	1	1	1	1	1
TOTAL 76	2	1	1	1	1	1
TOTAL 77	2	1	1	1	1	1
TOTAL 78	2	1	1	1	1	1
TOTAL 79	2	1	1	1	1	1
TOTAL 80	2	1	1	1	1	1
TOTAL 81	2	1	1	1	1	1
TOTAL 82	2	1	1	1	1	1
TOTAL 83	2	1	1	1	1	1
TOTAL 84	2	1	1	1	1	1
TOTAL 85	2	1	1	1	1	1
TOTAL 86	2	1	1	1	1	1
TOTAL 87	2	1	1	1	1	1
TOTAL 88	2	1	1	1	1	1
TOTAL 89	2	1	1	1	1	1
TOTAL 90	2	1	1	1	1	1
TOTAL 91	2	1	1	1	1	1
TOTAL 92	2	1	1	1	1	1
TOTAL 93	2	1	1	1	1	1
TOTAL 94	2	1	1	1	1	1
TOTAL 95	2	1	1	1	1	1
TOTAL 96	2	1	1	1	1	1
TOTAL 97	2	1	1	1	1	1
TOTAL 98	2	1	1	1	1	1
TOTAL 99	2	1	1	1	1	1
TOTAL 100	2	1	1	1	1	1

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS